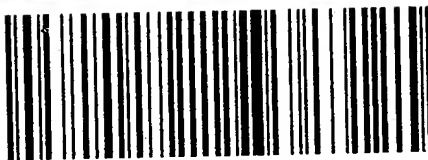


JOHN O GURSIK
800 BRANDY CAMP RD.
HARTSBY PA 15846

CERTIFIED MAIL™



7008 2810 0001 9970 6367



1000

22313

UNITED STATES PATENT AND TRADEMARK OFFICE

P.O. Box 1450

ALEXANDRIA, VA, 22313-1450

RETURN RECEIPT
REQUESTED

ATT. LINDA SCHOUK
LEGAL DEPT.

RECEIVED

JUN 08 2009

USPTO MAIL CENTER

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 42
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.32

Sent To: *Commissioner Patents*

Street, Apt. No.,
or PO Box No. *P.O. Box 1450*

City, State, ZIP+4 *Alexandria VA 22313*

PS Form 3800, August 2005 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 42.00
Certified Fee	2.75
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 46.90

Sent To: *Commissioner Patents*

Street, Apt. No.,
or PO Box No. *P.O. Box 1450*

City, State, ZIP+4 *Alexandria VA 22313*

PS Form 3800, August 2005 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313

2. Article Number
(Transfer from service label) 7006 2760 0001 8112 7024

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Commission for Patents
P.O. Box 1450
Alexandria VA 22313

2. Article Number
(Transfer from service label) 7007 1490 0004 7143 0922

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1640

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes



SW

ATT LINDA SCHOL

CONCERNING APPLICATION NO. 10/526/094

" "

10/521/897

THE FIRST APP. HAD 6 PAGES + COMPUTER DISC.
THE SECOND APP. HAD 4 PAGES + COMP. DISC.

THESE WERE SENT AS REPLYS ON BOTH PAT.
APPS IN ANSWER TO OFFICE ACTIONS. THE LAST
TIME THESE WERE SENT I WAS TOLD NOTHING
HAD BEEN SENT FOR A PROLONGED PERIOD OF TIME
ONE OF RECEIPTS REPRESENTS THE SENDING OF THIS
INFORMATION TO PAT. OFFICE. (LARGER DOLLAR VALUE RECEIPT)

THE PAGE WITH THE NO. 1 CIRCLED
WAS THE LAST CORRESPONDENCE FROM PAT. OFFICE

THE TWO LINE MESSAGE WAS THE ONLY THING
ON A BLANK PIECE OF PAPER, IT CAME IN THE
ENVELOPE COPIED ON THE SAME PAGE, IN THIS ENCL.
ALSO WAS A BLANK FORM "PTO - 1595" I HAD
SINCE BEEN INFORMED SHOULD I HAVE SIGNED
THIS AND SENT IT BACK MY PAT. WOULD HAVE
BEEN DONE. I WOULD GREATLY APPRECIATE WHATEVER
YOU CAN DO IN REGARDS TO THE MATTERS AT HAND.
CONTACT NO. 814 - 885 - 6883

THANK YOU

John O. Guhosik